

University of Iowa Ophthalmology

Subject:

Evaluator:

Site:

Period:

Dates of Activity:

Activity: Comprehensive, Glaucoma, Neuro-ophthalmology, Oculoplastics, Pediatric, Retina, VA Iowa City

Evaluation Type: PGY 3&4 Resident, Resident

Level of Ophthalmology training: (Question 1 of 18 - Mandatory)

1st Year (PGY2)
2nd Year (PGY3)
3rd year (PGY4)

If this evaluation includes your direct observation, please comment: (Question 2 of 18)

Gathering Information (Question 3 of 18 - Mandatory)

NA	Gathers information ineffectively, history very incomplete, purposeless, or painfully slow.	Gathers vaguely. History sometimes rambling, disjointed, or extremely slow.	Gathers with some efficiency but disorganized or very slow.	Gathers with moderate efficiency but sometimes incomplete or slow.	Gathers information solidly and misses key information rarely but could be faster.	Gathers information completely but could improve efficiency (faster, more concise).	Gathers information very completely, obtains old records if necessary, & is efficient.	Gathers additional information above & beyond normal to obtain key info if needed.	Gathers relevant information to provide clear, coherent & concise, faculty-level history.
0	1	2	3	4	5	6	7	8	9

Examinations (Question 4 of 18 - Mandatory)

NA	Exams are very inaccurate and incomplete. Poor examination skills or painfully slow.	Exams lack crucial information, very imprecise or inaccurate findings or extremely slow.	Exams lack important findings, are somewhat or inaccurate or extremely slow.	Exams lack some important findings, some inconsistencies in findings, or slow.	Exams provide key findings but lack subtle pertinent findings or could improve speed.	Exams rarely lack pertinent findings but could improve clarity, conciseness or efficiency.	Exams include all pertinent findings, rarely misses nuance of exam, efficient.	Exam includes nuances of clinical exam, finds unusual or distinctive subtle sign.	Exam rapid, directed to key and distinctive diagnostic sign, faculty level.
0	1	2	3	4	5	6	7	8	9

Diagnosis (Question 5 of 18 - Mandatory)

NA	Differential diagnosis wholly inadequate, no differential, misses correct diagnosis.	Differential is insufficient, inaccurate, or incomplete, wrong diagnosis.	Differential is incomplete or incorrect diagnosis and for wrong reasons.	Differential is incomplete but includes correct diagnosis perhaps for wrong reasons.	Differential is solid but lacks insight into prioritization of differential.	Differential is complete and accurate but could improve understanding of nuance of case.	Differential includes correct diagnosis & relevant other possibilities, missing rare causes.	Differential is complete, organized, concise & includes rare causes but prioritized by rank.	Differential is textbook level complete, concise, prioritized, & correct, faculty level.
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Management (Question 6 of 18 - Mandatory)

NA	Very inappropriate or dangerous management, lack of initiation of plan	Insufficient, incomplete, or inappropriate timing or initiation of plan	Incomplete but barely adequate plan, misses one or two key elements	Incomplete but adequate plan, no appreciation for nuances of case	Complete, adequate plan, simple but appropriate, some understanding of nuances	Complete plan that addresses most of the issues including nuances of case	Complete plan that addresses all specific details and nuances of case	Complete plan that includes understanding of next steps, prioritizes care plan	Directed plan that addresses key issues and nuances of case in concise, rapid manner
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Counseling (Question 7 of 18 - Mandatory)

NA	Very ineffective, rude or inappropriate, counterproductive, wrong information given	Ineffective, confrontational, imprecise, not appropriate for patient level of understanding	Ineffective, too blunt, insensitive, poor word choices, needs countermanding to correct	Barely effective but insensitive to needs or not aligned with patient level of understanding	Effective but lacks sensitivity to special needs of patient, does not address all issues	Effective, sensitive, addresses special needs of patient and most of the issues	Effective, sensitive to special needs or concerns of patient, addresses all issues	Goes above and beyond typical counseling to address unique needs of patient	Understands complexity of special needs, addresses nuances of care, overtly altruistic
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Resources (Question 8 of 18 - Mandatory)

NA	Unacceptable, dangerous or inappropriate utilization of auxiliary resources	Barely acceptable but inappropriate over utilization of resources	Acceptable but not parsimonious use of resources, does not use effectively	Calls upon resources appropriately but over and underutilization in specific areas	Is aware of available resources and uses appropriately but misses nuances	Understands and deploys resources appropriately, rarely misses subtleties	Has understanding of resource needs and allocation, does not miss subtleties	Has complete grasp of resource limitations, prioritizes parsimonious care	In depth understanding of available clinical resources, stewards resources with care
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Clinical Skills Comments: (Question 9 of 18)

Surgical Skills (Question 10 of 18 - Mandatory)

NA	Unsafe in the operating room	Novice able to describe the goals of the case and safely observe	Beginner able to do identify and use instruments able to do parts of cases	Beginner able to do parts of cases with assistance	Advanced able to do whole cases with assistance	Advanced beginner able to do portions of complex cases with assistance	Proficient operating able to whole cases and parts of complex cases with no assistance	Proficient able to efficiently operate on whole cases	Expert operating at the level of expert faculty with no assistance
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0	1	2	3	4	5	6	7	8	9
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Surgical Skills Comments (Question 11 of 18)

Appropriate Knowledge (Question 12 of 18 - Mandatory)

NA	Possesses knowledge that is outdated, does not understand literature, dangerous gaps	Rudimentary fund of knowledge, lacks very basic information, poor grasp of literature	Basic fund of knowledge that is weak in specific key areas, grasp of literature	Basic fund of knowledge, some in other key areas, modest grasp of literature	Solid fund of knowledge but misses some nuances of literature, is up to date in literature	Strong fund of knowledge including controversies in literature, lacks subtleties of care	Superior knowledge, demonstrates command of literature, asks pertinent questions	Excellent knowledge base, cites latest literature, asks challenging questions	Outstanding knowledge, cites latest literature at faculty level, teaches others
0	1	2	3	4	5	6	7	8	9

Clinical Assignments (Question 13 of 18 - Mandatory)

NA	Doesn't investigate topics needed for clinical assignments, lacks insight as to importance	Recognizes need for self-directed learning but does not pursue topics for improvement	Recognizes need but often fails to investigate or ask beyond simple questions	Asks simple and simplistic questions, does not follow through consistently with review	Asks appropriate questions, completes assignment when asked, solid performer	Asks probing questions, completes assignment without being asked	Asks challenging questions, reviews additional material, goes extra mile on assignments	Develops own learning plan, seeks & answers clinical questions independently	Double checks assignments, asks if further work or research is needed, faculty level
0	1	2	3	4	5	6	7	8	9

Applies Medical Knowledge (Question 14 of 18 - Mandatory)

NA	Does not apply knowledge toward clinical assignments, lacks basic facts	Lacks application or synthesis skills, can regurgitate facts of case	Lacks synthesis but has basic application skills and rote memorization skills	Can synthesize basic information but has difficulty applying skills to complex tasks	Can synthesize and apply medical knowledge in majority of clinical presentations	Synthesis and application of simple and complex disorders but misses subtleties	Application and synthesis of medical knowledge in common & uncommon cases	Understands nuance and subtlety to complex or rare cases	Recognizes exceptions to rules, discriminate application of rules to complex cases
0	1	2	3	4	5	6	7	8	9

Analytical Thinking (Question 15 of 18 - Mandatory)

NA	Shows simplistic thought processes, does not demonstrate analytical thinking	Rote memorization, lacks analytical process, employs faulty or simplistic logic	Basic analytical skills for simple problems, misunderstands complex cases	Basic analytical thinking for simple and some complex cases but lacks nuance	Analytical approach for simple & most complex cases may miss subtle issues	Understands the key clinical issue, analyzes complexities of case	Analysis extends to broader picture, analysis of rare or complex cases	Analysis of multiple interacting issues simultaneously, draws on experience	Analysis of multiple or novel conditions, demonstrates analytical thinking in novel case
0	1	2	3	4	5	6	7	8	9

Summary Comments (Question 16 of 18)

The resident has completed the stated objectives of the rotation *(Question 17 of 18 - Mandatory)*

Yes	No pls give remediation plan below
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Comments *(Question 18 of 18)*

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